

MISSOURI DEPARTMENT OF REVENUE DIVISION OF TAXATION AND COLLECTION PO BOX 3320, JEFFERSON CITY, MO 65105-3320

### OTHER TOBACCO PRODUCTS MONTHLY REPORT — OUT-OF-STATE

(REV. 11-2004)

| 4342 | FORM |  |  |  |  |  |
|------|------|--|--|--|--|--|
| TOTE | 4342 |  |  |  |  |  |

DLN

|                     | WHC                    | DLESALERS SE                                       | LLING INTO MISSOURI  |          |            |           |                         |        |  |
|---------------------|------------------------|--|--|----------|------------|-----------|-------------------------|--------|--|
| DUE                 | ON OR BEFO             | RE THE 15TH OF E                                   | ACH MONTH FOLLOWING THE REPO   | ORT M    | ONTI       | Η ΄       |                         |        |  |
| COMPANY LICENSE NO. |                        |  |  |          |            |           |                         | MONT   | H/YEAR   |
| STREET ADDRESS T    |                        |  |  |          |            |           |                         |        | PHONE  |
| CITY                |                        |  |  |          |            | STATE     |                         | ZIP CO | DDE  |
| LIST                | ALL TOBA               | CCO PRODUCTS                                       | DISTRIBUTED OR DELIVERED IN  | NTO N    | /IISS      | OURI      |                         |        |  |
|                     | OICE DATE              | INVOICE NUMBER                                     | CONSIGNEE  |          |            |           | DRESS                   |        | NUFACTURER'S INVOICE PRICE<br>FORE DISCOUNTS AND/OR DEALS) |
|                     |                        |  |  |          |            |           |                         | \$     |  |
|                     |                        |  |  |          |            |           |                         |        |  |
|                     |                        |  |  |          |            |           |                         |        |  |
|                     |                        |  |  |          |            |           |                         |        |  |
|                     |                        |  |  |          |            |           |                         |        |  |
|                     |                        |  |  |          |            |           |                         |        |  |
|                     |                        |  |  |          |            |           |                         |        |  |
|                     |                        |  |  |          |            |           |                         |        |  |
|                     |                        |  |  |          |            |           |                         |        |  |
| 1.<br>2.            | EXEMPTIC<br>2A. Produc | ONS:<br>It returned from Mis                       | orice (All products distributed or deli<br>ssouri customers (Complete<br>de) |          | into<br>\$ | Missou    | ri)                     | 1      | \$   |
|                     | 2C. Sales to           | o other Missouri lic                               | Schedule D on reverse side)  |          | \$         |           |                         |        |  |
|                     | TOTAL (Lir             | nes 2A, 2B and 2C                                  | ·)   |          |            |           |                         | 2      | \$   |
| 3.                  | Taxable oth            | her tobacco produc                                 | ots (Line 1 less Line 2)   |          |            |           |                         | 3      | \$   |
| 4.                  |                        |  |  |          |            |           | 4                       | \$     |  |
| 5.                  |                        |  |  |          |            |           |                         | 5      | \$   |
| 6.                  |                        |  |  |          |            |           | 6                       | \$     |  |
| 7.                  | Penalty (25            | 5% late penalty) (Li                               | ine 6 times 25%)   |          |            |           |                         | 7      | \$   |
| 8.                  | Total tax ar           | nd penalty due (Lir                                | ne 6 plus Line 7)  |          |            |           |                         | 8      | \$   |
| 9.                  | Interest (5%           | % APR) (Calculate                                  | using figure on Line 8)  |          |            |           |                         | 9      | \$   |
| 10.                 | Less credit            | (Attach letter of cr                               | redit)   |          |            |           |                         | 10     | \$   |
| 11.                 |                        |  | e 9 minus Line 10)   |          |            |           |                         | 11     | \$   |
| I do h              | ereby certify un       | nder the penalty of perjunsactions from the best i | ury that the foregoing and attached reports a information available.         | re a tru | e and      | correct s | tatement to the best of | my kr  | nowledge and is a complete and full                        |
| SIGNA               |                        |  | PRINT NAME   |          |            | TITLE     |                         |        | DATE   |
| REPO                | ORT MUST RE            | F ACCOMPANIED B                                    | Y FULL REMITTANCE OF TOTAL DUE   | (LINE    | 11)        |           |                         |        |  |

Make check payable to MISSOURI DEPARTMENT OF REVENUE, and mail to: Missouri Department of Revenue, Excise Tax Section, P.O. Box 3320, Jefferson City, Missouri 65105-3320. If you have questions or need assistance in completing this form, please call (573) 751-5772 (TDD 1-800-735-2966) or e-mail excise@dor.mo.gov. You may also access this form from the Department's web site: www.dor.mo.gov/tax/business/tobacco/forms/.



### MISSOURI DEPARTMENT OF REVENUE DIVISION OF TAXATION AND COLLECTION

# TOBACCO PRODUCTS — OTHER THAN CIGARETTES

#### RETURNS FROM MISSOURI CUSTOMERS — SCHEDULE B

| DATE RETURNED      | CREDIT/REFUND<br>NUMBER | CREDIT/REFUND<br>DATE | TO WHOM RETURNED | MANUFACTURER'S INVOICE PRICE (BEFORE DISCOUNTS AND/OR DEALS) |
|--------------------|-------------------------|-----------------------|------------------|--|
|                    |                         |                       |                  | \$   |
|                    |                         |                       |                  | \$   |
|                    |                         |                       |                  | \$   |
|                    |                         |                       |                  | \$   |
|                    |                         |                       |                  | \$   |
|                    |                         |                       |                  | \$   |
|                    |                         |                       |                  | \$   |
|                    |                         |                       |                  | \$   |
|                    |                         |                       |                  | \$   |
|                    |                         |                       |                  | \$   |
| Enter total on Lin | e 2A on front of re     | port                  | TOTAL            | \$   |



### MISSOURI DEPARTMENT OF REVENUE DIVISION OF TAXATION AND COLLECTION

## TOBACCO PRODUCTS — OTHER THAN CIGARETTES

MILITARY SALES — SCHEDULE D (Sales made to military installations within Missouri)

| YOUR<br>INVOICE DATE                            | YOUR<br>INVOICE NUMBER | TO WHOM SOLD | ADDRESS | MANUFACTURER'S INVOICE PRICE (BEFORE DISCOUNTS AND/OR DEALS) |
|---|------------------------|--------------|---------|--|
|   |                        |              |         | \$   |
|   |                        |              |         | \$   |
|   |                        |              |         | \$   |
|   |                        |              |         | \$   |
|   |                        |              |         | \$   |
|   |                        |              |         | \$   |
|   |                        |              |         | \$   |
|   |                        |              |         | \$   |
|   |                        |              |         | \$   |
|   |                        |              |         | \$   |
| Enter total on Line 2B on front of report TOTAL |                        |              |         | \$   |



MISSOURI DEPARTMENT OF REVENUE DIVISION OF TAXATION AND COLLECTION

TOBACCO PRODUCTS — OTHER THAN CIGARETTES

SOLD TO ANOTHER MISSOURI LICENSED WHOLESALER — SCHEDULE E—Form 4357, Other Tobacco Products Tax Exemption Certificate, must be completed and kept on file for each transaction listed here.

| YOUR<br>INVOICE DATE                      | YOUR<br>INVOICE NUMBER | TO WHOM SOLD | ADDRESS | MANUFACTURER'S INVOICE PRICE (BEFORE DISCOUNTS AND/OR DEALS) |
|---|------------------------|--------------|---------|--|
|   |                        |              |         | \$   |
|   |                        |              |         | \$   |
|   |                        |              |         | \$   |
|   |                        |              |         | \$   |
|   |                        |              |         | \$   |
|   |                        |              |         | \$   |
|   |                        |              |         | \$   |
|   |                        |              |         | \$   |
|   |                        |              |         | \$   |
| Enter total on Line 2C on front of report |                        |              | TOTAL   | \$   |